INSTRUCTIONS
Project Charter

What is this tool? The purpose of the project charter is to describe the performance improvement rationale, goals, barriers, and anticipated resources to which the team will commit.

Who are the target audiences? Staff members directly involved in the improvement project. Consider adding representatives from the physician and nursing staff, along with quality improvement representatives.

How can the tool help you? Upon completion of the project charter, the project team will have the following:

- Working knowledge of the project.
- Specific performance measures and targeted improvement goals.
- Identified organizational forces that may promote or impede project success.

How does this tool relate to others? The tool should be used following the completion of the prioritization matrix and in conjunction with the best practice detail forms.

Instruction Steps
1. Describe the project scope and provide goal statement. Some questions that can be addressed in the scope include whether this is a pilot project or will be implemented throughout the hospital. Which units will this project affect? Are certain service lines being included? What patient population will be included?
2. Document the case for change; list the key business reasons for initiating the project, specifically stating the business problem. These should come from Tool C.1, the prioritization matrix.
3. List the performance measures and baseline performance data. Set a performance goal for each measure.
4. List the project milestones that will guide your team in keeping on track. Milestones are major points in a project lifecycle. Some milestones for improvement projects could be the development of a tool or policy or completion of staff training on a new procedure.
5. Consider factors that are potential barriers to success such as resistance to change, resource limitations, or time constraints.
6. List the individuals or groups who will be affected by these strategies; include stakeholders.
7. Choose team members based on stakeholder analysis. Enter the project team members’ names. Review the estimated percentage of time the executive liaison, M.D. liaison, and project liaison will dedicate to the project.
8. Document any additional resources that may be required, such as team members and administrative support.
9. Review the charter with the executive, M.D., and project liaisons and obtain signatures.

Resources
Project Charter

Due: ________________
To: ________________

Project: ________________________________________________________ Schedule: ____________ to ________________

Institution: _________________________________ Individual Completing This Form: ________________________

PROJECT PLAN

1. PROJECT DESCRIPTION/SCOPE. Pilot unit or housewide project? Specific patient population? Are certain service lines being included?

2. CASE FOR CHANGE (Potential ROI). Describe the business reason(s) for initiating the project, specifically stating the business problem.

3. PERFORMANCE MEASURES

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<th>Baseline</th>
<th>Goal</th>
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4. Milestones

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<th>Milestones</th>
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<tr>
<td>a.</td>
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<td>b.</td>
<td>b.</td>
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<td>c.</td>
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5. POTENTIAL BARRIERS TO SUCCESS (from Tool C.1. Prioritization Matrix)

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

ASSEMBLE TEAM & RESOURCES

6. STAKEHOLDERS. List the individuals or groups who will be affected by these strategies.

a.  
d.  

b.  
e.  

c.  
f.  

7. TEAM MEMBERS. Consider including representatives from stakeholder groups noted above.

Executive Liaison: ____________________________  Team Member: ____________________________
Physician Liaison: ____________________________  Team Member: ____________________________
Project Liaison: ____________________________  Team Member: ____________________________
Team Member: ____________________________  Team Member: ____________________________
Team Member: ____________________________  Team Member: ____________________________

% Time Required of Each:  
Executive Liaison: ____________________________  Physician Liaison: ____________________________  Project Liaison: ____________________________

8. ADDITIONAL RESOURCES NEEDED

a.  
b.  
c.  

9. SIGNATURES

Executive Liaison/Date: ____________________________
Physician Liaison/Date: ____________________________
Project Liaison/Date: ____________________________

Resources:
1. © 2007 by Karl E. Wiegens. Permission is granted to use and modify this template.
3. DHFS – Project Chart.